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Number of pages (including cover): 21

**F A X C O V E R**

**TO:** EXAMINER JOSEPH W. DRODGE  
**Company** United States Patent and Trademark Office  
**Fax** 571 273-8300

**Docket No.:** I0168-708019  
**Serial No.:** 10/712,685  
**Filing Date:** November 13, 2003  
**Applicant(s):** Freydina et al.  
**Title:** WATER TREATMENT SYSTEM AND METHOD

**From** Elias Domingo

**Direct dial** 617-395-7012

**CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. 1.8(a)**

The undersigned hereby certifies that a copy of the following documents in the above-referenced application (total 21 pages including cover sheet) are being facsimile transmitted to the attention of Examiner Joseph W. Drodge, FAX number (571) 273-8300, P.O. Box 1450, Alexandria, VA 22313-1450 on the 18 day of May, 2006.

Transmittal Letter  
Response to Office Action mailed February 22, 2006  
Information Disclosure Statement

774789.1

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Docket No.: I0168-708019

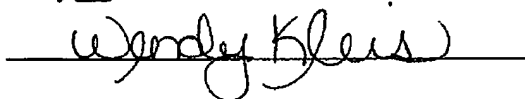
## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Evgeniya Freydina et al.  
Serial No: 10/712,685  
Confirmation No: 9109  
Filed: November 13, 2003  
For: WATER TREATMENT SYSTEM AND METHOD

Examiner: Joseph W. Drodge  
Art Unit: 1723

## CERTIFICATE OF FACSIMILE TRANSMISSION 37 C.F.R. § 1.8(a)

The undersigned hereby certifies that this document is being transmitted via facsimile to Examiner Joseph W. Drodge, FAX number 571-273-8300 at the U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450, in accordance with 37 C.F.R. § 1.6(d), on May 18, 2006.



**Mail Stop Amendment**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

The fee has been calculated as shown below:

FEE CALCULATION

	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate	Additional Fee
TOTAL CLAIMS	26 -	22	4	x \$ 50.00	= \$ 200.00
INDEPENDENT CLAIMS	3 -	6	3	x \$ 200.00	= \$ 600.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					= \$ 800.00

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Transmitted herewith are the following documents:

- ☒ Response to Office Action mailed February 22, 2006
- ☒ Information Disclosure Statement
- ☒ Return Receipt Postcard

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at (617) 395-7000.

The Commissioner is hereby authorized to charge the additional claims fee and the IDS filing fee in the total amount of \$980.00 to Deposit Account No. 50/0214. A duplicate of this sheet is enclosed.

Respectfully submitted,  
Evgeniya Freydina et al., Applicants

By: 

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